UNITED STATES HOUSE OF REPRESENTATIVES FOR New Members, Candidates	FORM B Candidates, and New Employees	15 2018 Fage 1 or 10
Name: MARGO L. DAVIDSON Daytime Telephone:	one:	/ 18 APR 23 PM 1: 19
New Member of or Candidate for State: PA U.S. House of Representatives District: NEW 5 Candidates – Date of Election:	Check if Amendment	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
STATUS New Officer or Employee Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant	Period Covered: January 1,	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	IONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No reporting period?	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes No No 18ability (more than \$10,000) at any point during the reporting period?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	\$5,000 from a Yes No
ATTACH THE CORRESPONDING SCHEDULE IF THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU	EDULE IF YOU ANSWER "YES" THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	- ANSWER BOTH OF THESE	QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	er "excepted trusts" need not be disclosed.	tave you excluded Yes 🔲 No 💢
EXEMPTION – Have you excluded from this report any other assets, "unearmed" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	spouse or dependent child because they mee	et all three tests for Yes 🔲 No 🔀

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Page 2

					•	٦,۶	Ş	\$5.0 mon	Ŷ	3 6 6	हे है	ş	1288	\$		\neg
		27.83	PAO		Examples:			as interest-bases and in the market of the first of the f	bank and o	aff IRAs (k) plans) p account the	vide comple not use on	ncome during the year.	wouldown or sto woeding \$1,000 and (b) any other n which generated	dentify (a) e	Assets	
		-	Detern	ABC Hedge Fund	1	Maga Corp Stock		all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is \$5,000, list every financial incomestation or interest or description, e.g., provide a complete residence or description, e.g., next all property; and a city and state. For an ownership infanest in a privately-held business that is not publicly traded, state the name of the business, the mature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacabion homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal interest in, or income derived from, a federal interest in, or income derived from, a federal interest in, or income derived from a federal interest in, or income source is that of your apouse (SP) or income source is that of your apouse (SP) or dependent critical column on the far left. For a destated discussion of Schedule A requirements, please refer to the instruction booklest.	ther cash aco	For all RRAs and other retirement plans (auch as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds do not use only ticker symbols).		productors of stocking and with a law illustrate water exceeding \$1,000 at the end of the reporting period and (b) any other reportable seasi or source of income which generated more than \$200 in "unserned"	each asset held	Assets and/or income Sources	BLOCK A
		ENSLOP	everd from	ne Fund	chuster	Stock		resitution where it beening accounts to beening accounts to beening accounts as or description and state. a privately-held for investite the name of	ounts, total t	irement pla ue for each i reporting th	stocks and in oils).	,	of the report	a	come So	ŝ
		<i></i>	0					are there is over the term in	nome er	ns (auci	nutuel fi		permeeun, poped fluid poped fluid	investment or	UPC 05	Į
				×			Ş		3 3	3 8	بالب					_
		ļ	ļ	_	1	L		None	>	4	*Column M is for assets held by child in which you have no interest	Š	specify the method used. If an asset was sold during	2		ı
		ļ			4	L		\$1-\$1,000	Φ.		2 3		9 5 E	- ≦		
\vdash		-	~		Indefinite		_{	\$1,001-\$15,000	C		3 E	٤	Was			- 1
					\$	L	_	\$15,001-\$50,000	0	4	5 8	9	000			
			<u> </u>	ļ	ļ	Ľ	<u> </u>	\$50,001-\$100,000	m	_	3 8	į		見	¥	ı
\vdash		\geq		ļ	╄	_		\$190,001-\$250,000	<u> </u>	4	3 2	2	3	8	a	핃
\vdash		ļ	ļ	×	\vdash	L		\$250,001.\$500,000	<u>ெ</u>	4	4 2	8	apor I	Q	Ž	BLOCK B
-		ļ		 	 	-		\$500,001-\$1,000,000	<u> </u>	4	*Column M is for assets held by your spouse or depende child in which you have no interest.	"None."	specify the method used. If an asset was sold during the reporting period and is include the asset was sold during the reporting period and is include the second sold sold sold sold sold sold sold sol	indicate value of asset at close of the reporting period. If you	Value of Asset	- [
		├	<u> </u>	<u> </u>	╀	-	_	\$1,000,001-\$5,000,000			apor.	ã	9	D D	~	
\vdash			-	 	╁	L	_{	\$5,000,001-\$25,000,000 \$25,000,001-\$50,000,000	_	-	8	Ş	2	5		
		_	_	ļ.	╁	⊢	-+	T 17 - 18 - 140 - 1	*	-	8	ğ		8		ı
\vdash		 	 	-	 	 		Over \$50,000,000	_	-{	휧	٤	Ę.	¥ .		Į
-		-				ļ.,		Spouse/DC Asset over \$1,000,000*	ĸ	-		9.5		<u> </u>	_	_
				<u> </u>	igspace	<u> </u>		NONE			"None" if the asset game during the reporting period.	3	01(K), IR	ř		
						Ľ	<u> </u>	DIMIDENDS			# =		(k), IRA, or 529 Tax-Deferred	ŝ		ı
		L					_	RENT		_	중불	ž. Pa	2 2 2	8	Ţ	
								INTEREST			Ž₽	5 E	or 529 account		ğ	<u></u>
								CAPITAL GAINS		7	5.9 3.9		8 8	7	오	BLOCK C
						Γ	_1	EXCEPTED/BLIND TRUST		7	8.3	* P	counts)		줐	ô
		X	×		T	T	_1	TAX-DEFERRED		1	1	vinvested, must be disclosed as I or assets held in taxable accounts.	(E	<u> </u>	Type of Income	
				Partnership Income	Royalties		_	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			If the asset generated no income he reporting period.	einvested, must be disclosed as income or sesets held in taxable accounts. Check	tion generate landware in John (ed.c) and (ed.)	Check all columns that apply. For accounts		
	•	X	X					None -	-]			g ह	C 2	ğ		
						>	~]	\$1-\$200	•				X 2 3 3	I		ļ
								\$201-\$1,000	F			≚	Ats indicate that gather ok. None	를 강		
					Г			\$1,001-\$2,500	_	. I		₫	100	for which		
					×			\$2,501-\$5,000	3	?		8		Ž.		
				×	П			\$5,001-\$15,000	Current			8	n if nati income	you checked 'Tax-De		
								\$15,001-\$50,000	: إِزَ	:		ğ	# # Q	Č.		
						Ĺ		\$50,001-\$100,000				¥,	- I -	⊼		
								\$100,001-\$1,000,000				독 중	income by dr led, must be semed or ger			
								\$1,000,001-\$5,000,000 >	٤			N N	ю г	<u>4</u>	¥	J
							[Over \$5,000,000 ≥		1		lumn XII is for assets held by your spouse or dependent child in which you have no interest	₹₽ ₹		Amount of Income	_[
								Spouse/DC Income over \$1,000,000°		_}		8	ted of the	<u>\$</u>	¥	BLOCK D
		×	X				$=$ \downarrow	None -	1			₹.	# # # # # # # # # # # # # # # # # # #	ě	<u> </u>	욂
								\$1-\$200				2	appropriete s income	in Black C, you may check the "	ಕ	Ĭ
						٨	<u> </u>	\$201-\$1,000				2.	propriete Income	ā	₹	
							_	\$1,001-\$2,500 a	∐ჳ	,		*	वे ह	Q Q		
							_	\$2,501-\$5,000	40			ð	box below for assets	2		
					×		_	\$5,001-\$15,000				1	# 5	<u>ਵ</u> ਵ		1
				×			_	\$15,001-\$50,000				ž.	至至	No.		
							_[\$50,001-\$100,000				Ž	5 £	8		
					П			\$100,001-\$1,000,000	֓֡֡֞֞֞֓֓֓֓֓֡֓֓֓֡֓֓֡֓֓֡֓֡֡֡֓֓֡֡֡֡֡֡֡֡֡֡֡	1		7	8 A	Ę		
					П			\$1,000,001-\$5,000,000 >					: 1	ð		
					П			Over \$5,000,000					6 4	ì		
					Ħ			Spouse/DC Income over \$1,000,000*					3 3	<u> </u>		J
	_				_		_									

SCHEDULE C - EARNED INCOME

Name:

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

Source (include date of receipt for honoraria) ABC Trade Association, Baltimore, MD (July 15) State of Meryland Civil Wier Roundsable (Oct. 2) Ontario County Board of Education	1		
	iype	Current Year to Filing	Preceding Year
	Honorarium	\$6	\$500
	Spouse Speech Spouse Salary	\$0 80	\$1,000 \$1,000
COMMONIERALLY Of PAMMSY LIENTE	Sections	29,060.08	85,671.54
CBER	Sulary	2,800.00	14,085,51
Employment compensation	Compaisation	0.00	4,608.00
(Daverly Heizhos Retident Communely	Salavy	760.00	0-00.
	,		(
			•

SCHEDULE D - LIABILITIES

Page 잌 5

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence. exceeded \$10,000. (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period *Column K is for liabilities held solely by your spouse or dependent child.

Date Liability Date Liability Creditor First Bank of Warningson, DE SP Charles Firmanical SP Charles Firmanical SP Theorizan Educator Service 6/84 SP Theorizan Educator Service 6/84 Student loan						Γ			A	Amount	Amount of Lia	Amount of Liability	Amount of Liability	Amount of Liability	Amount of Liability
Creditor Liability Type of Liability T			}		>	æ	ဂ	0	m	711		ก 	၈ <u>r</u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
AMELIAAN FOU SUS 6/88 Student Coan Commission DE AMELIAAN FOU SUS 6/88 Student Coan Chiese Financial 11/15 Can lease American Educator Service 6/84 Student Loan Throughous Educator Service 6/84 Student Loan	DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$15,000					\$500,001- \$1,000,000	* 1,1-1-1	\$1,000,001- \$5,000,000	\$1,000,001-	\$1,000,001- \$5,000,000 \$5,000,001-	\$1,000,001- \$5,000,000 \$5,000,001- \$25,000,000 \$25,000,001-
AMERICAN Edución Sovice 6/84 PANERICAN Edución Sovice 6/84	Exampl		5/98	Mortgage on Rental Property, Dover, DE				×							
(Those Financial) (Three ican Educator Service 6/84	AA	MI BONFOU FUS	88/9	student wan							-				
American Educator Service 6/84		hose Finance	11/15	Car lease		X					+				
	SP 127	vertican Education Service	6/84	Student loan							+-				
			,								 				
											-				

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

		ZNON	Position
			Name of Organization

SCHEDULE F - AGREEMENTS

Name:	Page 5 of 6	
or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	I of government service;	_

identify the date, parties to, and general terms of any agreement or a continuation or deferral of payments by a former or current employer employer.

Date	Parties to Agreement	Terms of Agreement
	3NON	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not reposit information listed on Schedule C.

government as	nd any information considered completitial as a result of	government and any information considered combential as a result of a privileged relationship recognized by law. Lo not repeat information issued on scriedure c.
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
/	JNONE	

								NOTE NUMBER
						·	Me	
							MONE	
	A Company				i			
								NOTES